NEWS DIGEST

Services stretched

The NHS is struggling and stretched too thinly, the RCN has said in response to a report from the King’s Fund, which found that pressures on A&E are causing serious knock-on effects for other services. Waiting times for treatment are getting longer as the NHS struggles with demand, the report says. The RCN believes problems are most visible in A&E but the whole NHS is affected.

Termination response

The RCN has responded to a Northern Ireland Department of Justice consultation on proposed changes to the law on the termination of pregnancy. The response indicates broad support for the proposed legislative changes covering lethal foetal abnormality, rape and sexual crime. It also backs the possible alteration in the law to establish, for the first time in Northern Ireland, a legal right of conscientious objection for nurses and other health professionals, an issue consistently highlighted by the College.

NHS England

Members who transferred into NHS England in April 2013, and those who have started working for the organisation since, are asked to ensure that their new employment details are up to date. “Without the correct employer details we can’t get in touch with members affected by change,” said Sue Bucksey, RCN Employment Relations Adviser. www.rcn.org.uk/myrcn

Scotland investment

The RCN has welcomed the Scottish Government’s announcement that £100 million is to be invested in the NHS over three years to tackle delayed discharges. Theresa Fyffe, RCN Scotland Director (pictured), said this is an important first step in starting to tackle the pressures in hospitals. However, she warned: “It is only one element of the pressure on beds and we must make sure that the money is used for the purpose it’s intended for and makes a difference.”

China delegation

A delegation of Chinese health managers visited the RCN to find out more about the College’s work on children’s and women’s health and gain an understanding about how the RCN influences policy in these areas. The 18-strong party requested the visit after seeing the RCN publication: Defining Staffing Levels for Children and Young People’s Services. They plan to use these standards as a blueprint for delivering improved services when they return home.

Welsh award open

Members in Wales are encouraged to apply for the Chief Nursing Officer (CNO) for Wales’ Betsi Cadwaladr Scholarship Foundation Award. Open to registered nurses and midwives, the award of £1,500 will be presented to the applicant who has achieved excellence in leadership, clinical practice, research or education. www.rcn.org.uk/wales

Financial advice at the click of a button

Investing doesn’t have to be complicated or expensive. A new low cost online investment service from Lighthouse could be just what you’re looking for – it makes online investing simple. Why not use it for your Individual Savings Account (ISA)? Visit www.rcn.org.uk/xtra for more information.
Members consider
NHS pay offer

Members are to vote on whether to accept the latest government proposal to settle the ongoing pay dispute. Vice Chair of RCN Council Lors Allford said: “At an emergency Council meeting we agreed unanimously that the membership should have the final say.”

The new offer from the Government came after sustained campaigning and lobbying work by the RCN and other NHS unions. Details are included in consultation emails and letters to be sent to members who work for the NHS in England.

The proposal honours the recommendation of the independent NHS Pay Review Body (PRB) for a consolidated one per cent pay rise for all staff up to band 8c. A consolidated, or permanent, pay rise is taken into account when calculating allowances and pensions.

The Government has also proposed an increment freeze in 2015/16 for staff on and above band 8a but has offered a longer-term commitment to the PRB.

The membership should have the final say

The RCN says the offer is the best that can be negotiated and goes some way towards meeting the original demands in the dispute.

But the College warned that there is more to do. Dr Peter Carter, RCN Chief Executive, said: “The Government must recognise that the only solution to the recruitment crisis, which is hammering staff morale and patient care, is a sensible long-term workforce strategy with fair pay at its core.”

As previously reported in RCN Bulletin, different arrangements are in place in Wales and Scotland. No offer has been made in Northern Ireland.

Meanwhile, the RCN What if...? campaign to defend pay and conditions will continue. Members in selected NHS workplaces in England and Northern Ireland are being encouraged and assisted to seek time off in lieu or payment for excess hours worked.

Complex complaints

The way complaints are handled in the NHS is still too complex, MPs have said. A report by the Commons health select committee said there should be a single, easily identified gateway for complainants to ensure their concerns are handled by the most appropriate organisation.

The RCN welcomed the report, saying it should help clarify processes for members. The College stressed that every patient complaint is a valuable opportunity for the NHS to review its service and to improve standards of care.

The RCN also backed the recommendation that NHS staff who raise concerns must be properly supported. A new RCN guide makes it easier for members to assess whether a situation they have witnessed or experienced should be raised as a concern. Download Good Practice for Handling Feedback from www.rcn.org.uk/publications

Direct satisfaction

Nearly all members are satisfied with services provided by RCN Direct. In two recent surveys, members were asked to rate their experience of calling the RCN Direct membership and advice contact centres. In both cases, the overall satisfaction rate was 90 per cent. Members were also more likely to recommend the RCN to someone else than in the previous year.

Direct satisfaction

Get the latest news on pay at www.rcn.org.uk/whatif
Bournemouth beckons for lively debates

Booking will soon open for RCN Congress 2015, which this year returns to Bournemouth

Congress is a massive event in the College’s calendar. Through a series of member-led debates and discussions, it shapes professional nursing practice and the direction of RCN activity for the year ahead.

As well as the main agenda, Congress features a diverse range of events aimed at helping members develop professionally. There is also a huge exhibition featuring employers, recruitment agencies and suppliers, and countless opportunities to network with colleagues from all parts of the UK.

Stuart McKenzie (pictured), who this year will chair Congress for the first time, urged members to book their place early. “If you’ve never been to Congress before, I can promise you that attending for the first time will be an experience you won’t forget,” said Stuart. “And for those who are regulars, all of us on the Congress Agenda Committee will be striving to make this year’s event more memorable than ever.”

The committee is currently considering all the suggestions submitted as possible items for inclusion on the Congress agenda. Stuart said: “We’ve had some really interesting ideas from the submitting entities and we’ll be announcing the agenda next month.”

He added: “The general election has put health care firmly in the media spotlight and we fully expect that all the political debate we are witnessing at the moment will trigger many suggestions from members about topics that could make emergency agenda items.”

RCN Congress takes place at the Bournemouth International Centre from 21 to 25 June. It is free to attend.

Members benefit from RCN legal expertise

New figures show a successful year for RCN legal team

The last 12 months have proved to be immensely successful for RCN lawyers who have fought to defend rights and provide protection for members throughout the UK.

In 2014, the team recovered more than £7 million in compensation for members in England, Northern Ireland and Wales.* RCN in-house lawyers worked on more than 2,000 regulatory and employment cases throughout the year. In this time, the Nursing and Midwifery Council (NMC) cleared a large backlog of cases so the RCN’s team was particularly busy representing members at hearings.

“It’s been a busy but successful year,” said Chris Cox, RCN Director of Legal Services. “We have once again demonstrated our expertise and value for money.

“Our figures show that having RCN membership and therefore representation significantly increases the likelihood of getting a ‘no case to answer’ outcome at the NMC, and decreases the chances of any case even getting as far as a hearing. You are also more likely to recover compensation in courts and tribunals.

“The RCN’s own lawyers, and the barristers used by the College, are highly experienced and have the unique specialist knowledge for the kinds of cases we take on, as is reflected in our outcomes,” he added.

Ninety-eight per cent of members who have used RCN legal services have endorsed them, saying they were either very satisfied or satisfied with the service they received.

The RCN’s legal team started 2015 by winning a six figure out of court settlement in a negligence claim for a member injured at work.

If you are a full member, student or career-break member, health care assistant or nurse cadet, you are entitled to legal advice and, in appropriate circumstances, representation on any matter of law that occurs in the course of your employment. “If you think you might need legal advice or representation, you should first contact RCN Direct or your local RCN steward or safety representative for advice,” said Chris.

*Figures for Scotland will follow later in the year.
### Circle withdrawal ‘deeply worrying’

RCN steps in to help members facing uncertainty

RCN representatives are offering support to members working at Hinchingbrooke Hospital in Cambridgeshire after private company Circle Holdings withdrew from its 10-year contract after just two years. Hinchingbrooke was the first NHS hospital to be taken over by a private company under new commissioning rules.

The RCN described the news of the withdrawal as “deeply worrying” and said it highlights the major financial crisis facing the NHS, and the daily pressure facing staff. Dr Peter Carter, RCN Chief Executive, said: “At the time Hinchingbrooke was taken over, many considered this kind of arrangement to be the way forward for the health service. This announcement shows that private sector involvement is not always the answer.”

Karen Webb, Director of the RCN Eastern Region, said the College will be supporting members worried by the developments. “The RCN has been asking the management of the hospital to meet with nursing staff to discuss their concerns for the last 18 months, but this hasn’t happened.

“The morale of staff at this challenging time cannot be ignored. Local representatives have been doing invaluable work and will continue dialogue with the trust as right now our priority is to ensure staff are supported to deliver the excellent standard of care they want to provide for patients.”

In 2012 the RCN warned against the approach taken by Circle.

### RCN comments on new NMC code

Revised code published after extensive consultation

The Nursing and Midwifery Council (NMC) released a new code for nurses and midwives last week following feedback from the RCN and other stakeholders. The code, which comes into effect from 31 March, has six new sections.

The RCN has welcomed additional guidance on social media and duty of candour but has suggested it would be helpful for the NMC to add other, more expansive documents linked to the code so registrants had access to more specific advice. RCN Principal Legal Officer Roz Hooper said: “After commenting in detail on the code, I’m pleased that our issues have been largely dealt with.”

The NMC will be sending copies of the code in the post to registrants in early March. Members are advised to make sure address details held for them are correct.

Read more at [www.nmc-uk.org/code](http://www.nmc-uk.org/code)

### Keys ‘under the mat’ used to burgle homes

**LIVERPOOL VICTORIA**

According to research conducted by LV=, the RCN’s approved provider of home insurance, thousands of homeowners are being burgled with their own house keys, as thieves use keys hidden in easily accessible places.

Despite a general decline in burglaries, official police figures show that more than 6,000 burglaries take place every year where the thief uses a key to access the property.

Many people have a relaxed attitude to home security and nearly one in three (29 per cent) regularly leave a key hidden outside their home, which can be easily accessed by an opportunistic thief.

LV= is urging homeowners to tighten up their home security by keeping their doors locked when they are out and their keys safe from opportunistic thieves.
What you’ve been saying

Nurse appreciation
I had a recent stopover in hospital and all the nurses and doctors of all levels were wonderful. I was dreading it but so fortunate that my experience was a good one. You all deserve knighthoods and more money. Thank you.

Julia Hartstill, via Facebook

President in the press
Good to see Cecilia Anim @cisanim President of @theRCN being featured in the @guardian

Elizabeth Anionwu, via Twitter

She’s so right, it’s about investing in and looking to the future – more than just firefighting continuously.

Stuart McKenzie, via Twitter

Energising events
The energy is palpable at the #MarySeacole alumni event.

Sarah Amani, via Twitter

Great energy at RCN PNA forum discussing forward planning for primary care nursing.

Karen Storey, via Twitter

Northern thanks
Please can I say a big thank you to Greg Canning and his team at the RCN Northern Region?

Greg represented me in a seven-year dispute for back pay, first from Gateshead and then South Tyneside trusts. Following a grievance procedure I was awarded the full amount.

It was a long battle and I am sure the trusts felt that I would go away if they procrastinated long enough. The RCN was involved for three years, before resolution.

Thank you to Greg and the team.

Name withheld, by email

Hot topic
What solutions are there to current problems facing A&E departments?

“We need to look to solve the problems outside emergency departments if we are to relieve the symptoms within it,” says Chair of the RCN Emergency Care Forum Janet Youd. “This is not an A&E crisis. The real issue is the inability to admit acutely ill people to inpatient beds in a timely manner. This results in crowding in the department with the subsequent impact that new emergency patients are unable to be moved in for examination and treatment.

“The reason for the lack of available inpatient beds is complex. Many trusts have reduced their bed numbers, with a plan to move more care into the community, but the resources required have been insufficient.

“The other reason for high bed occupancy is the lack of social care provision resulting in delayed discharge for frail elderly patients. There is also a huge variation around the country of GP availability with some patients attending emergency departments out of frustration.”

Cardiology nurse practitioner Sue Marriott agrees. “I think solutions involve ensuring patients can access their GP in a timely fashion, further public education about the purpose of A&E and enhancing community health and social services to facilitate admission avoidance and timely, safe discharge. Acute hospital beds should be for acutely ill patients,” she says.
From the heart

OPINION

Parliamentary candidates competing for power will be dependent on your support so make the most of your vote on 7 May

The general election is still more than three months away and judging by media coverage so far, by the time 7 May arrives prospective MPs will have left no NHS stone unturned in the hunt for a few more votes.

There's nothing new in that. Every time an election is called, the state of the nation's health services is placed under forensic scrutiny. The political parties trade blows and promise that only they can make the future bright.

Some of us may tire of this claim and counter-claim but I think it confirms that the NHS can help win votes and lose them.

The election is a brilliant opportunity for the nursing profession to highlight the issues that matter and to tell parliamentary candidates how we think an effective, patient-centred health service should be run.

It's easy to feel disengaged from mainstream politics but I would argue that in the weeks that remain before the election each of us has a duty to get involved. Nurses and health care assistants are the people who drive the NHS, the ones who know it best. There are also a lot of us. In every constituency in the country, the votes of nursing staff can make a difference.

Over the page there's information about the RCN's election manifesto. Please try to find time to read and act upon it. The outcome of the general election matters – to you and your families but above all to your patients.

Visit elections.rcn.org.uk

Dr Peter Carter
RCN Chief Executive

Convince me

Convince me that nurses do not need to be academic. If academic means the ability to think and solve problems then these are crucial skills our profession cannot be without. Patients' needs have changed and will continue to do so. Nursing must change too and being academic is essential if we want to continue to meet our patients' health requirements.

Catherine Hughes,
advanced nurse practitioner

What I've been reading

In The Fever: How Malaria Has Ruled Humankind for 500,000 Years, Sonia Shah recalls childhood visits to India, where relatives laughed at her bleeding bites. She questions and researches malaria's history and looks behind the science in pursuit of answers on why it has never been eliminated. I applaud her detective skills and reminder of the power of nature and resilience of a tiny parasite.

Sandra Grieve,
independent travel health specialist nurse
Make your vote count

RCN members can really influence the shape of the next parliament by standing up for what is important for nursing staff. Lynne Pearce reports

The nursing profession has a real opportunity to influence the outcome of the general election on 7 May, says the RCN. Health will be central to the debate and it’s a contest which is viewed by experts as one of the most closely fought and difficult to predict in living memory.

“This year we can make our votes count more than ever before,” says Chair of RCN Council Michael Brown. “In many constituencies the size of the local MP’s majority is smaller than the number of RCN members we have in that area. When we add our families, friends and those who use our health services, you can see we have the chance to make a real difference.”

To help members decide where to place their cross on polling day, the RCN has launched a manifesto, calling on the new government to address three key areas. These are to:
- improve patient care
- value nursing
- invest in health and care.

“Our manifesto is based completely on what members have told us are the most important issues for them,” explains Will Hardy, RCN Parliamentary Affairs Manager. “We had an extensive consultation process, with more than 10,000 members sharing their views in a specially devised survey.”

Many of those who took part also submitted their own testimonies. “These are powerful stories that illustrate how our members are being seriously affected by what’s happening in their professional life at the moment. They also talk about the changes they would like to see for a better future,” says Will.

What we want

For Michael, the manifesto provides a clear statement of what the RCN wants from the next government. “We should use it to find out the views of local candidates on the issues that matter to us,” he says.

To that end, he advises members to contact their candidates through the Nursing Counts website asking them to pledge their support for the RCN’s manifesto.

“This means that members and their families can cast their vote in the way they believe is best for nursing and the future of the NHS.”

Michael says all three priorities are important for nursing staff. “Patient care is central to our manifesto. However, to get this right there’s a need to put an end to boom and bust workforce planning for the NHS,” he says. “We need the right staff in the right place at the right time if we’re going to keep the NHS safe for future generations.”

Fair pay for NHS staff is also high on his agenda. “It’s not right to expect nursing staff to subsidise the provision of patient care in the face of fewer staff, diminished services and increasing numbers of patients, as has been the case for the last five years,” says Michael.

In numbers
- 37 days between 30 March, when parliament is dissolved, and election day on 7 May
- 650 seats available for election
- 194 seats have a majority of 10 per cent or less (BBC)
- Approximately 1,800 members of the nursing workforce in every constituency.
Why nursing counts

The RCN’s manifesto, Nursing Counts, has three overall priorities, each underpinned by three specific demands.

Improve patient care
- Ensure safe staffing levels across all settings
One nurse who has been in the profession for 30 years said: “I have never known frontline staff to be under so much pressure. Current staffing levels do not allow for safe patient care.”
- Give nurses access to training
- Listen to staff

Value nursing
- Give nursing staff the fair pay they deserve
- Put a stop to the downgrading of nursing skills and experience
One member commented: “Where else do people have to accept less money and be demoted, having qualified and continued with development throughout their career? When will we earn the respect that we deserve?”
- Protect the future of nursing
One student nurse said: “I started my first year bright eyed and bushy tailed, excited about being a nurse. By the second year I had been told many times not to do nursing, and seen so many articles in the papers about ‘bad nurses’ that now, in my third year, I would be completely demoralised, if I did not constantly remind myself of the gratitude that some patients have expressed to me.”

Invest in health and care
- Guarantee no more cuts to the nursing workforce
“The Government needs to wake up and realise that budget cuts will never improve patient care. More registered experienced nurses on the floor will,” said one member.
- Increased resources for community health care
One community nurse urged: “Honestly invest in community care and don’t just pay lip service. District nursing is a beautiful art and maintaining people in their own home the best option for most.

“However, it is in crisis and needs major investment as nurses are moving out due to lack of morale, feeling their trust in the NHS as a good employer is wasted.”
- Implement workforce planning that matches the needs of patients

Where can you find out more?
Pledge your support, find out the latest news and get top tips to help you put pressure on your local candidates to sign up to the RCN’s priorities.

Download a copy of the RCN’s manifesto and watch a short film on the Nursing Counts website: elections.rcn.org.uk
Regaining control

Forensic nurse examiner Emma Durmaz provides frontline support to victims of rape and sexual assault. She speaks to Sophie Lowthian about her role.

"A lot of people don't realise that sexual assault isn't about sexuality, it's essentially about control," says RCN member Emma Durmaz, a forensic nurse examiner and the clinical manager at the Glade sexual assault referral centre (SARC) in Worcester.

The centre, which sees approximately 250 people each year, is one of 42 SARCs across the UK, providing support for victims of sexual assault and rape.

"The people we see need to rebuild their confidence so it's vital we help them regain a sense of control," Emma says. "We support them to make decisions about their examination and treatment plan.

"The most important thing to keep in mind is that in six to 12 months we want to have an individual who is emotionally well – or at least heading that way. It's very much an attention-to-detail job – you've got to be scrupulous," adds Emma. The examination, which can take up to four hours, is undertaken with a crisis support worker. "The two of us work closely together through all stages to ensure the best support possible. Organisation, precision and good documentation are all crucial."

Making a connection

Emma says there are emotional and operational challenges. "The emotional load can be hard but I love my job. Looking after one person at a time is definitely a positive aspect of the role – you have a chance to build a therapeutic relationship and make a connection with someone," she says. "When a client leaves saying 'You've made me feel empowered today' you know you are doing something worthwhile."

In terms of looking after her own emotional wellbeing, Emma says debriefing helps. "You know when things have become too much and you need to step back – sensing that is part of being a nurse. I always think there's no point in stressing over things you can't change. Instead you must try to make a difference to the things you can. By helping our clients as best we can we are making a positive difference to their lives."

Emma explains that in the USA a high percentage of sexual health examinations are undertaken by nurses and the role is widely recognised, while in England only about 20 to 30 nurses are employed as forensic nurse examiners. "But it's a role that is growing across the UK. As it's a relatively new specialty it's quite exciting to be involved as it evolves.

"There's no reason why a nurse can't do this work just as well as a doctor. Nurses often take a more holistic approach so it's a job well suited to us."

Annie Norman, RCN Criminal Justice Nursing Adviser, says Emma is a great example of a nurse delivering compassionate, holistic care to people who are at a seriously low point in their lives. "Through the work that Emma does and other nurses like her, victims can be helped to be survivors and look more positively towards their future."

Got a story to tell? Email bulletin@rcn.org.uk

Forum member?

Join the RCN Nursing in Criminal Justice Services Forum and the RCN Forensic Nursing Forum at www.rcn.org.uk/forums
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*10% of new RCN customers with 5 years NCD paid £159 or less between 01/08/2014 - 31/10/2014. †10% of new RCN customers paid £107 for buildings and contents between 01/08/2014 - 31/10/2014.
Money in your pocket

Members could claim up to £300 in tax relief by following some simple advice from the RCN Welfare Service, says Sharon Palfrey

If someone said they would pay you £86 to complete a short form and put it in the post, you would probably jump at the chance.

But when staff in the RCN Welfare Service team speak to members about their financial concerns they find only a small percentage of employed nurses, midwives and health care assistants (HCAs) claim the tax relief available to them.

“In these times of financial austerity, there are very few members who can afford not to claim the money they are entitled to. Remember, it costs nothing and it’s a very simple process,” says RCN Welfare Adviser Claire Cannings.

The average annual tax relief for basic rate taxed nurses who pay RCN subscriptions, Nursing and Midwifery Council (NMC) fees and a flat rate for cleaning uniforms is £86. This figure will be even higher if you have a subscription to Nursing Standard.

And don’t forget, if this is the first time you have applied; you can claim not just for the current year but also the previous four years. This could mean you receive a cheque from HM Revenue and Customs (HMRC) for up to £300.

“With attacks on nursing pay coming from all directions, I would urge all members to make sure they claim,” says Claire. “And while HCAs don’t currently pay professional fees, they can still claim for their RCN subscription and other flat rate allowances, so it’s very much worth all members applying.”

Your questions

Who can claim?
All members who are UK tax payers can claim tax relief on their RCN membership fees.

What can I claim for?
You may be eligible to claim tax relief on a range of payments including:
- RCN membership fees
- NMC registration fees
- your uniform (including shoes and tights)
- laundry costs for your uniform.

How do I claim tax relief?
A claim form is included in your annual RCN membership pack. Or download a form from www.rcn.org.uk/membership/taxrelief

How do I claim for previous years?
Contact RCN Direct Membership Services on 0345 772 6100 (select option one).

Where do I send my form?
Send your claim form to: HMRC, PAYE and Self Assessment, PO Box 1970, Liverpool L75 1WX.

How much will I get?
This will depend on a number of factors including how much your annual fees cost and your tax situation. As a guide, members who are UK tax payers can claim up to 20 per cent on their RCN membership fees.

Are there any time limits?
The time limit for making a backdated claim is generally four years prior to the current tax year, but this may depend on your personal circumstances. There are also deadlines for getting your claim to HMRC.

Where can I get more information?
Telephone HMRC on 0845 300 0627 or visit www.hmrc.gov.uk/incometax/how-to-get.htm
As the RCN Research Society prepares to hold its annual international conference in April, Lynne Pearce investigates its relevance to frontline nursing staff

Research unites us in a common aim of finding evidence for practice that improves patient care

For those who think research has little to do with the practice of nursing, think again, says one of the RCN International Nursing Research Conference keynote speakers.

“I think sometimes practitioners feel that conferences like this aren’t for them – they are too lofty, academic and not applicable to practice,” says Professor Jill Maben, who is Director of the National Nursing Research Unit at King’s College London and a member of the RCN Research Society. “But it’s the questions that arise from practice that we need to research. My own work is embedded in the current debates about nursing.”

Jill’s presentation will look at some of the challenges of humanising health care for patients. “Many of the things we know patients value – such as kindness, compassion and being with someone who is dying – can feel invisible in a system that often puts process over humanistic elements,” she explains.

Attracting around 400 nurses from all over the world – including the USA, Australia, the Far East, the Middle East and Europe – the annual three-day conference starts on Monday 20 April and takes place at the East Midlands Conference Centre in Nottingham.

A varied programme
Alongside three keynote speeches, around 200 concurrent papers are presented on topics as diverse as reducing malnutrition in nursing homes; caring for refugees; and career planning for nurses over 50. There are also fringe events. This year these will feature nurses involved in clinical research, former Mary Seacole Award winners and past recipients of the Florence Nightingale travel scholarship.

For more information visit www.rcn.org.uk/research2015

“Conferences like this are so important because they help to connect all areas of nursing and research together,” says Jill. “Nursing is such a broad profession and it can often feel like you’re doing a very different job from your colleagues. But research unites us in a common aim of finding evidence for practice that improves patient care.”

Professor Michael Traynor is chair of the conference’s scientific committee. “Many of those who come along are already involved in research or doing research degrees, but the conference is open to everyone. It’s a very welcoming environment that’s friendly, inclusive and informal,” he says.

“There’s been a lot of scrutiny of nurses recently,” he adds. “The conference will focus on evidence-based discussions that go way beyond people’s opinions. Speakers who are leaders in their field will be directly addressing the predicament that nurses find themselves in.”

What makes the conference stand apart is the academic rigour of the contributions. “Only the very best get in,” says Michael. “Because every abstract is subject to peer review.”

Networking is another important aspect. “A lot of people make new networks and professional contacts,” says Michael. “Those who are working in research can meet and have conversations with leaders in their field. Old friends are reunited too. Last year I met someone that I’d trained with 30 years ago. I come away feeling exhausted but also informed, energised and, above all, inspired.”
RCN Diabetes Forum Committee Member Siobhan Pender highlights the importance and advantages of collaborative working

Seventeen years ago, when I started my career as a paediatric diabetes nurse, I only gave kidney disease a passing thought. I was there to stop diabetes complications from happening in the first place.

Fast forward to 2015 and, sadly, as an adult diabetes specialist nurse, I’m reflecting on the recent death of a 31-year-old man I had known since the age of seven. He had been having haemodialysis for 18 months and died waiting for a kidney-pancreas transplant.

Like so many nurses and doctors who went into the field of diabetes to prevent complications, I am now meeting a growing number of people facing the reality of kidney disease and the prospect of dialysis.

I acknowledge my lack of expertise in this area, and how in the past I was content to recognise the renal team as the experts and move away.

I now think this approach was wrong. I believe all diabetes nurses need to have a competent knowledge of renal disease and its management right up to and after transplantation.

To challenge my mindset I decided to embrace the expertise of our hospital diabetes renal nurse. We have shared stories and I have learnt about aspects of nursing people with diabetes and kidney disease that I would not have found in a clinical paper.

A group of diabetes nurses from around the country who have an interest in renal disease have joined forces to try to work together to improve practice, share ideas and learn from each other.

The group, called the ReD Forum, is looking for like-minded people, so if you are a diabetes nurse specialising in kidney disease and would like to be a part of it please contact my fellow committee member Jo Reed at jo.reed@imperial.nhs.uk

This is an edited version of a longer blog post. To read the full version visit www.rcn.org.uk/diabetesforum

Committee Member Dianne Yarwood shares some highlights from the past few months and looks forward to 2015

Last year was a busy year for the RCN History of Nursing Society, as we kicked off our commemoration of the 100th anniversary of the start of the First World War.

August saw the launch of our events series and an exhibition, *Frontline Nurses: British Nurses of the First World War*, in the RCN Library and Heritage Centre, to mark this important anniversary.

So far we have held four successful events at RCN headquarters, including a joint study afternoon with the Defence Nursing Forum called *Frontline Nursing: Then and Now*.

Two further lectures are planned for the next couple of months, including one in Edinburgh. April will see the launch of a new exhibition and lecture series which will run until October.

Looking further forward, 12 October will mark the 100th anniversary of the execution of Edith Cavell, the British nurse who was shot by the Germans for helping allied soldiers escape from German-occupied Belgium. We hope to hold an event in Salford, where Miss Cavell worked from 1906-07. We are making arrangements with the Cavell Nurses’ Trust and the chair of the Norfolk Cavell 2015 Commemoration Partnership.

We are always keen to build links with other RCN forums and societies and are working with the Mental Health Nursing Forum on an exhibition on the history of mental health nursing. This will be held in the RCN Library and Heritage Centre in London from October and will be accompanied by a series of events, including the launch of a mental health nursing history timeline.

For exhibition and event details visit www.rcn.org.uk/library

Find out more about the RCN History of Nursing Society at www.rcn.org.uk/historyofnursing

In the past I was content to recognise the experts and move away

Download Starting Injectable Treatment in Adults with Type 2 Diabetes: RCN Guidance from www.rcn.org.uk/publications

We are always keen to build links with other RCN forums

History of Nursing Society plans ahead

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Find out more about the RCN History of Nursing Society at www.rcn.org.uk/historyofnursing
Get blogging

New ways of communicating with RCN forum members are currently being explored.

Since October, regular blogging training sessions have been run for forum committee members at RCN headquarters in London. These are proving popular and the first few blog posts have already been published, so check your forum website to see if your committee has got involved.

Blogs offer a more efficient, timely and democratic way of communicating than electronic newsletters, which can take months to put together and distribute, and often place a heavy workload on a single editor. The RCN is keen to hear from you, so if you have an idea for a blog post please contact your forum steering committee.

Definition of nursing

The RCN has updated its Defining Nursing publication.

The document describes what the RCN believes to be the essence and six defining characteristics of nursing. The College says that while other health care professions share some of these characteristics, they are uniquely combined as nursing.

The publication describes what nursing is, clarifies the role of the nurse and identifies areas where research is needed.

The definition also reflects nursing’s diversity which includes the care of people who are healthy and those who are sick, and of groups of people and individuals.

Fertility conference

The RCN Fertility Nursing Forum is holding a conference and exhibition next month. Fertility Nursing: Managing Future Expectations will take place from 10am to 3.30pm on Saturday 7 March at RCN headquarters in London. The event will help extend your knowledge and understanding of key issues in fertility nursing. It will enhance the professional and educational development of fertility nurses, midwives and health care assistants working in licensed and non-licensed fertility departments in the UK. Visit www.rcn.org.uk/fertility15

Ebola latest

The RCN has been working closely with Public Health England to ensure systems and processes are in place to support and protect RCN members and other health care workers working with patients with Ebola. The RCN’s webpage on Ebola is updated regularly. Visit www.rcn.org.uk/ebola for details on the current situation and information on what the College is doing, including the creation of a virtual Ebola reference group.

Congress call

The RCN Older People’s Forum is seeking applications from its members to represent the forum at this year’s RCN Congress. Forum Vice Chair Iain McGregor said: “Congress is the most important event for the RCN, and particularly for the professional forums. We would love to hear from members across the UK, either expressing an interest to attend or voicing your thoughts on the agenda when it’s published.” Email iainmcg@rcn.org.uk for more information.

What I’m thinking

February is Lesbian, Gay, Bisexual and Trans (LGBT) History Month. It’s an opportunity to celebrate the lives and achievements of the LGBT nursing community, and to champion and promote better care for patients. And although this month is designated LGBT History Month, the RCN works to promote equality in all areas and tackle homophobia throughout the year.

To celebrate, the RCN is holding its annual evening reception on Wednesday 18 February from 5.30pm to 7pm at RCN headquarters in London. We’ll be joined by a number of guests including James Taylor, Head of Policy at LGBT charity Stonewall. It’s a chance for us to celebrate the many milestones reached in the battle for equality and inclusion, as well as to think about the shape of the challenges to come. I hope you’ll be able to join us. Please email diversity.team@rcn.org.uk to confirm your attendance.

Visit www.rcn.org.uk/diversity
Talking the talk on obesity and malnutrition

Tuesday 17 March
RCN HQ, 20 Cavendish Square,
London W1G 0RN

This joint RCN and RCGP study day will provide practical training for all non-specialist nurses and doctors working in primary care. Featuring a workshop format plus interactive work book and reflective templates, this event will enable staff to incorporate evidence based approaches to obesity and malnutrition within routine consultations. The course will focus on supporting behaviour change using motivational interviewing techniques, addressing issues such as goal setting, helping patients with severe and complex obesity, and approaches for staff with a weight problem themselves.

For information and to book visit www.rcn.org.uk/rcncrgp15

Scotland

www.rcn.org.uk/scotland
Edinburgh
Thursday 26 February, 12.15pm (includes sandwich lunch)
RCN Scotland HQ, 42 South Oswald Road, Edinburgh EH9 2HJ
Member consultation event.
A meeting with the RCN Scotland Board to seek members’ views on the use of member information, member awards, Congress review and branch resources. Email luci.pollard@rcn.org.uk or call 0131 662 6131.

Northern Ireland

www.rcn.org.uk/northernireland
Belfast
Wednesday 25 February, 9.30am-4pm
RCN Northern Ireland HQ, 17 Windsor Avenue, Belfast BT9 6EE
Email cst@rcn.org.uk for more information.

Wales

www.rcn.org.uk/wales
Llandudno Junction
Friday 27 February

Conwy Business Centre, Junction Way, Llandudno Junction, Conwy LL31 9XX
Two RCN Wales seminars.
In the morning, the Mental Capacity Act 2005 and deprivation of liberty safeguards and in the afternoon, safeguarding vulnerable adults. Call 02920 680713 or email rhona.workman@rcn.org.uk

East Midlands

www.rcn.org.uk/eastmidlands
Boston
Wednesday 18 February, 7pm
Committee Room 1, Pilgrim Hospital, Sibsey Road, Boston, Lincolnshire PE21 9QS
RCN South Lincolnshire Branch meeting.
Members are invited to attend the branch’s regular meetings to find out about the work of the RCN in South Lincolnshire and help shape priorities for action.

Eastern

www.rcn.org.uk/eastern
Bury St Edmunds
Thursday 5 March
Meeting Room, RCN Eastern Region, Abbotsgate House, Bury St Edmunds, Suffolk IP32 7AU

Learning Reps: The Role of the RCN Learning Representative in Raising Concerns About Nursing and Health Care.
This event will provide an opportunity for you to understand your representative role in terms of the context for speaking out and supporting others to raise concerns about nursing and health.
For more information email sue.wilton@rcn.org.uk

London

London
www.rcn.org.uk/london
London
Friday 6 March, 6.30-10pm
Governors Hall, St Thomas’ Hospital, Westminster Bridge Road, London SE1 7EH
Mary Seacole winter supper lectures for International Women’s Day.
A fundraising event to mark International Women’s Day jointly presented by the Mary Seacole Memorial Association and Mary Seacole Memorial Statue Appeal. Visit http://tinyurl.com/omp5jr2

North West

www.rcn.org.uk/northwest
Manchester
Wednesday 26 February, 9am-4pm
The Place Apartmental, Ducie Street, Manchester M1 2TP
The Role of the Rep: Representing Equally – Delivering Excellent Equality Representation in the Workplace.
All representatives are welcome to attend this joint RCN Northern, North West and Yorkshire & the Humber regions continuing learning and development event. Email gaynor.brADBURY@rcn.org.uk

Northern

www.rcn.org.uk/northern
Sunderland
Monday 9 February, 1-3pm
RCN Sunderland Office, Avalon House, St Catherines Court, Sunderland SR5 3XJ
Retired nurses’ group meeting. All retired members are welcome.

South East

www.rcn.org.uk/southeast
Guildford
Wednesday 18 February
The Circle Bar, Yvonne Arnaud Theatre, Millbrook, Guildford GU1 3UX
Free health care support worker lunch and learn session.
Topics to include: the Care Certificate, dementia care, employment rights, accountability and the RCN First Steps programme. RCN members and non-members welcome.
To book your place email carole.stimson@rcn.org.uk

South West

www.rcn.org.uk/southwest
Torquay
Tuesday 3 March, 6.30pm
RCN office, Torbay Hospital, Lawes Bridge, Torquay TQ2 7AA
RCN Torbay Branch meeting.
All members who live or work in the Torbay area are welcome. For more information or to book: margaret.ritchie@nhs.net

West Midlands

www.rcn.org.uk/westmidlands
Dudley
Friday 13 February, 2pm
Falcon House, The Minories, Dudley DY2 8PG
Courage: Raising Concerns – the 6 Cs in Practice.
An RCN Black Country local learning event presented by RCN Regional Officer Dee Holbrook.
This event will focus on maintaining patient safety, raising concerns and being accountable for your own practice.

Yorkshire & the Humber

www.rcn.org.uk/yorkshireandhumber
Leeds
Wednesday 18 February, 2-4pm
RCN Leeds Office, 9 Bond Court, Leeds LS1 2JZ
West Yorkshire Branch meeting.
For more information email adele.bird@rcn.org.uk